



Aldershot Urban District Council.

Annual Report

OF THE

Medical Officer of Health,
Annual School Report &
Report of the Inspector of
Nuisances :: *for* 1919.

BY

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ALDERSHOT;
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ALDERSHOT URBAN DISTRICT

STATISTICAL SUMMARY FOR 1919.

Latitude	51° 15' N.
Longitude	46' W.
Area of Urban District	4,178 acres.
Rateable Value	£160,621
Population at Census 1911 (Town)	19,464
" " " " (S. Camp)	15,711
Population estimated to July 1st, 1919 (Town)	22,500
Birth Rate, 1919 (Civilian)	21.1
Death Rate, 1919 (Civilian)	12.1
Infantile Mortality Rate (Civilian)	86.
Rainfall, 1919	31.9in.
Mean Temperature for the year	47.5°

**To the Chairman and Members of the Aldershot Urban
District Council.**

GENTLEMEN,

I have the honour to present my Annual Report on the health of the district in 1919, and at the same time wish to thank you for your courtesy and assistance during the past year.

I am, Gentlemen,

Your obedient Servant,

E. W. ROUTLEY.

REPORT *for* 1919.

Natural and Social Conditions of the District.

POPULATION.—The population of the Census of 1911 was as follows :—

Town	19,464	{ Males	9470
		{ Females	9974
S. Camp	15,711	{ Males	13256
		{ Females	2455

35175

The estimate for the average population in 1919 so far as regard the Town is based mainly on the rationing returns, and is placed at 22,834.

The average population for the South Camp for 1919 is estimated at 15,189, divided as follows :—

Men	13502
Women	1061
Children	626

15189

The average total population, therefore, of the military and civil inhabitants is estimated at 38,023.

AREA, DENSITY OF POPULATION.—The Urban District comprises 4178 acres divided thus :—

Town	1432
S. Camp	2746

Total 4178 acres.

The density of the town population is 15·9 per acre.

GEOLOGY.—The Northern portion of the district lies on the Bagshot Sands, while the Southern part comprising most of the Civil area, lies on the London Clay. Along the banks of the Blackwater stream, which is the eastern boundary, the soil is alluvial. The lowest part of the district is 231

feet above Ordnance Datum ; the elevation at the extreme western part is 393 feet. The Town itself is built on the top, and along the sides, of a hill.

SOCIAL CONDITIONS.—There are a few small factories and a corresponding number of workshops, connected with the various commercial businesses. A large number of the houses are let in lodgings. The industries of the Town almost entirely live by reason of the camp.

VITAL STATISTICS, 1919.—Births (civilian) 483 (M. 259, F. 224), of which 45 (9 per cent.) were illegitimate. The birth-rate for the year was 21 per 1,000 of population, a distinct increase on the preceding year. The birth-rate for England and Wales for the year was 18·5.

DEATHS.—266 deaths were registered (males 151, females 115). Of this number 49 (18 per cent.) died in the Farnham Infirmary ; 18 died in hospitals elsewhere (London, Guildford, etc.), and 8 died in the County Lunatic Asylum. The main causes of death were Pulmonary Tuberculosis, 26 ; Cancer, 30 ; Pneumonia and Bronchitis, 41 ; Epidemic Influenza, 21 ; and Heart Disease, 21. Two deaths took place from Diphtheria, one from Whooping Cough, one from Poliomyelitis, and one from Anthrax ; 7 deaths took place from violence, and there were 4 suicides. The death rate for the year was 12·1 per 1,000 of population, that for England and Wales being 13·8. In spite of the presumed increase in the population, the number of deaths was less than in any of the three preceding years. The following table of mortality should be consulted for fuller details.

CAUSES OF DEATH IN ALDERSHOT U.D., 1919.

Causes of Death (Civilians only)		Males.	Females.
All Causes.		151	115
1	Enteric fever		
2	Small-pox		
3	Measles		
4	Scarlet fever		
5	Whooping cough	1	
6	Diphtheria and croup		2
7	Influenza	10	11
8	Erysipelas		1
9	Pulmonary tuberculosis	13	13
10	Tuberculous meningitis		2
11	Other tuberculous diseases	2	
12	Cancer, malignant disease	18	12
13	Rheumatic fever	1	

	Males.	Females.
14 Meningitis	1	1
15 Organic heart disease	11	10
16 Bronchitis	11	7
17 Pneumonia (all forms)	16	7
18 Other respiratory diseases	1	
19 Diarrhœa, &c. (under 2 years)	1	
20 Appendicitis & typhlitis	1	2
21 Cirrhosis of liver		
21A Alcoholism		
22 Nephritis and Bright's disease	7	4
23 Puerperal fever		
24 Parturition, apart from puerperal fever		1
25 Congenital debility, &c.	17	5
26 Violence, apart from suicide	7	
27 Suicide	4	
28 Other defined diseases	28	34
29 Causes ill-defined or unknown	1	3
Special Causes (included above).		
Cerebro-spinal fever		
Poliomyelitis		1
Anthrax	1	
Deaths of infants under 1 year of age	29	13
Illegitimate	2	2
TOTAL BIRTHS	259	224
Legitimate	239	199
Illegitimate	20	25
POPULATION.		
For Birth-rate	22834	
For Death „	21920	

HOSPITALS.—The following are available for the civil population :—Civil Isolation Hospital, the Cottage Hospital, and the Union Infirmary. These are used to their fullest extent possible under the circumstances, there is, however, an imperative want in this, as in other towns, that should be supplied, namely an institution for the sick, which shall not on the one hand be dependent on charity, and on the other be associated with the Poor-Law.

Sanitary Circumstances of the District.

WATER.—The Town water is in the hands of a Public Company, and is derived from a series of Artesian Wells sunk in the chalk underlying the London clay at the southern border

of the district. There is a sufficient and constant supply, and the quality is excellent. The following is an average analysis of samples taken in 1919 :—

Free ammonia	.....	.....	absent
Albuminoid ammonia	.....	.....	·0042
Oxygen absorbed (2 hours)	.....	.....	·01
Nitrites	.....	.....	absent
Nitrates	.....	.....	·33
Chlorine	.....	.....	2·5
Total solids	.....	.....	48·0
Total hardness	.....	.....	22·0
Poisonous metals	.....	.....	absent

RIVERS AND STREAMS.—There is one stream, the commencement of the Blackwater river, which forms a portion of the boundary of the district. It receives no pollution except from the ordinary surface water channels.

DRAINAGE AND SEWERAGE.—The sewerage is mostly carried out on the separate system, although in some directions it is combined. The purification is effected by contact beds, and irrigation over the sewage farm area 15 acres in extent. I have examined the effluent several times during the year, and its average character has been found satisfactory, the amount of absorption of dissolved oxygen in five days rarely exceeding 1· part to 1·5 parts per 100,000.

With the exception of eight cottages in outlying districts, in which part closet or cesspools are used, all the houses in the district are connected with the main drainage system, and have separate water closet accommodation.

SCAVENGING.—This is carried out by the Surveyor's Department twice a week throughout the district, and so far as the collection, removal, and disposal of the house refuse is concerned, the character and efficiency of the arrangements are excellent. The storage, however, of the house refuse is far from satisfactory, and is open to serious objection on grounds of health. It is an exception to find a house properly provided with a suitable covered receptacle as is enjoined not only in the Public Health Act, 1875 (Sec. 36), and the Amendment Act of 1890 (Sec. 11), but also in the Town's own Nuisance Byelaws, Section 5. The Health Committee, however, have the matter under their serious consideration from time to time, but no definite line of procedure has been arrived at. It would appear that the financial burden which would be placed upon owners or occupiers, if they are to be compelled to purchase sanitary dustbins of approved type, forms a serious obstacle to effective improvement in this direction.

It would, however, be a right and proper thing if the Council would, at all events, insist, in the case of every house in the district, that the receptacle used, although not necessarily of the best type, should be reasonably fit for its purpose, and, in addition (and this is the most important point), that it should at all times be kept properly covered.

Sanitary Inspection of District.

NUMBER AND NATURE OF INSPECTIONS.

Number of visits to houses <i>re</i> infectious disease	24
Complaints received	220
Ordinary and <i>re</i> inspections	678
Number of visits to Bakehouses	21
" " " Cowsheds, Dairies, and Milkshops	137
" " " to Slaughterhouses	166
" " " Premises where food is exposed or in preparation for sale	330
" " " Common Lodging Houses and Houses let in lodgings	253
" " " Offensive Trades	7
" " " Drainage Works in progress	27
" " " Piggeries	3
" " " Workshops	9

DEFECTS OR NUISANCES DISCOVERED AND REMEDIED.

Defective drains	42
Chokages in drains	30
Defective W.C. pans	8
Foul W.C. pans	9
Defective W.C. flushing cisterns	50
Dilapidated W.C.s	31
Defective scullery sink wash-pipes	19
Defective gully channels	7
Defective or insanitary scullery sinks	5
Defective or insufficient yard pavements	24
Defective or insufficient eaves, gutters, and drain-pipes	83
Defective and leaky house roofs	83
Damp house walls	54
Dirty and insanitary walls and ceilings	102
Overcrowded houses	13
Keeping of animals	9
Accumulations of offensive matters	30
Defective or unopenable bedroom windows	59
Defective house wall and ceiling plaster	71

Defective house floors	.....	.....	.....	.....	48
Defective scullery floors	.....	.....	.....	.....	19
Insufficient water supply	.....	.....	.....	.....	3
Insanitary urinals	.....	.....	.....	.....	5
Defective firegrates	.....	.....	.....	.....	17
Miscellaneous	.....	.....	.....	.....	13

Number of preliminary notices served	.....	.....	.....	.....	340
" " statutory	.....	.....	.....	.....	19
Resulting on the remedying of the defects enumerated above.					

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYELAWS OR REGULATIONS.

OFFENSIVE TRADES.— 1 Tripe Boiler.
15 Fish Fryers.
2 Rag and Bone Dealers.
1 Gut Scraper.

Houses let in lodgings	.....	.....	150
Common Lodging Houses	.....	.....	4
Cowsheds	.....	.....	4
Dairies	.....	.....	8
Milkshops	.....	.....	28
Slaughterhouses	.....	.....	3

There are no underground sleeping rooms as defined by Section 17 (7) Housing and Town Planning Act, 1909.

FOOD.

MILK SUPPLY.—Excepting the milk produced by the 80 milch cows housed within the district, the milk supply is imported by rail.

The wholesomeness and the general adequacy of the arrangements for the supply and distribution of the milk are very satisfactory. There has been no necessity to take action in regard to tuberculosis milk.

OTHER FOODS.—There are three private slaughter houses in the district—2 licensed from year to year and 1 registered. The two licensed slaughter houses comprise one building divided into two compartments, and are in the occupation of one butcher only.

Most of the slaughtering is carried on at the registered slaughterhouse, where much difficulty is experienced as regards the inspection of carcasses owing to congestion and the lack of facilities usually appertaining to a modern slaughter house. The provision of a public abattoir (where meat,

whether killed within or without the district, would be inspected before distribution) is urgently needed, and the question of such provision is at the present time under consideration.

No doubt an abattoir would long ago have been in existence but for the apparent unwillingness of the majority of butchers in consenting to make use of its advantages when erected. The cleanliness of the three slaughter houses mentioned is of a high standard, and with the exception of one or two small matters requiring attention—which were immediately remedied by verbal request—no fault can be found with them in that respect.

Visits of inspection have been paid to slaughter houses on 166 occasions, mostly when killing was in progress.

Twenty-eight instances are recorded of butchers requesting inspection of meat at slaughter houses prior to being deposited and exposed for sale at the shop.

One seizure only took place during the year, which was in respect of a carcase of a pig affected with tuberculosis, and found in one of the slaughter houses immediately after completion of dressing. A magistrate's order for destruction was obtained, and legal proceedings were eventually taken with unsatisfactory results.

The magistrates dismissed the case in the first instance without hearing evidence for the defence, and the case was sent back to the magistrates for rehearing by decision of the Higher Court. The magistrates again dismissed the case on the ground that the carcase was not deposited for preparation for food, and that the butcher was on the point of requesting inspection by the Sanitary Inspector.

Butchers' shops, sausage making premises, bakehouses, and premises where food is prepared or exposed for sale have been regularly inspected, 351 inspections having been made during the year. No difficulty has been experienced in this respect, and every facility is afforded in such inspection.

SUMMARY OF FOODSTUFFS CONDEMNED AND DESTROYED.

	Weight (lbs.)
2 complete carcases of beef (tuberculosis)	1280
6 complete carcases of pork do.	1097
1 complete calf carcase do.	40
1 complete sheep carcase do.	88
Parts of carcases of beef (tuberculosis)	565
Parts of carcases of defrosted beef (putrefaction)	616
Fish (putrefaction)	9072
Sausages (putrefaction)	430
Fruit (unwholesome)	3126

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

With the exception of a number of cases of influenza in March and April, there has been but little infectious disease present in the Town generally. The notifications received include the following :—

Scarlet Fever	9
Diphtheria	18
Measles	15
Rubella	15
Pulmonary Tuberculosis	16
Other forms of Tuberculosis	5
Erysipelas	8
Influenzal Pneumonia	27
Primary Pneumonia	4
Poliomyelitis	3
Malaria	1
Ophthalmia Neonatorum	1
Dysentery	1

SCARLET FEVER.—The whole of the cases were removed to the Isolation Hospital, and in four of them the diagnosis of Scarlet Fever was not confirmed. The remaining cases were of a very mild type. One girl of fourteen admitted with a definite attack of Scarlet Fever, had been employed in the Hippodrome chorus during the previous week, and doubtless received the infection from a carrier in the visiting company.

Disinfection has been carried out in all instances.

DIPHTHERIA.—Eighteen cases were notified, of which 2 did not give a positive result on bacteriological examination. In five of the houses infected the drainage was found to be seriously defective, and in 4 cases there was more or less serious overcrowding. Bacteriological examination is carried out in all suspected cases. Antitoxin is supplied free on demand to all medical practitioners. All contacts are examined personally by myself, and throat cultures prepared. In all cases disinfection is carried out, and all patients, with one exception, were removed to the Isolation Hospital. Two deaths took place from the disease. The mortality in Diphtheria is nearly always due to the fact that medical attention is not directed to the condition in its early stages either on account of the necessary expense, or due to carelessness of observation when such cases (usually children) are showing signs of illness. At times when there are a number of cases

of Mumps known to be in the neighbourhood, any swelling of the neck is frequently thought to be due to that complaint ; but not uncommonly the swelling of the glands is directly the result of the infection in the throat of Diphtheria. Two such mistakes occurred in December, and generally produce serious results, as by the time medical advice has been obtained, the opportunity of saving life by early administration of antitoxin and removal to hospital has been defeated.

Disinfection, with quarantine of contacts, was carried out in all instances.

MEASLES AND GERMAN MEASLES.—Only a few sporadic cases of these disorders were notified, and there was no mortality in the Town from measles in 1919. It should be borne in mind, however, that measles is always a disease to be taken seriously, inasmuch as, although the risk to life may not be alarming, the after effects—*e.g.*, liability of contracting tuberculosis or pneumonia, and the life-long afflictions of ear disease and deafness—are to be especially feared.

INFLUENZA.—The deaths of 21 persons were registered as due to this serious disease, which had already, in the previous year, taken such heavy toll in the regular mortality. Circulars and handbills dealing with necessary precautions, were largely circulated in the Town. A copy is as follows :—

The Medical Officer of Health recommends the following

PRECAUTIONS.

to be taken for the prevention of the spread of

I N F L U E N Z A .

Influenza is particularly infectious during its incipient stage, and while the person who has contracted it is still able to follow his vocation and to mix with his fellow men. Almost everybody, therefore, is exposed to infection at one stage or another of an epidemic. While no certain safeguard against the disease is as yet known to exist, it is important to give attention to the following points during an epidemic wave.

PREVENTION.

Infection may be guarded against by :—

- (A) Healthy and regular habits, and avoidance of :—
 - (i) Fatigue.
 - (ii) Chill.
 - (iii) Alcoholic excess.
 - (iv) Crowded meetings and hot rooms.
 - (v) Unnecessary travelling.

- (B) Good ventilation in working and sleeping rooms.
- (C) Warm clothing.
- (D) Gargling from a tumbler of warm water to which has been added enough permanganate of potash to give the liquid a pink colour.
- (E) VACCINATION.—A vaccine against influenza has been prepared by the Ministry of Health, and is available for general use in the same way as the War Office have provided similar vaccine for the troops. It is issued to Medical Officers of Health for distribution free of charge among medical practitioners within their districts, and any person who wishes to be vaccinated should apply to his private medical attendant. The purpose of the vaccine is prevention, and therefore to obtain its value it should be used *before* an epidemic occurs. It cannot be guaranteed that the vaccine will necessarily protect from attack, but there is reason to expect that if an attack occurs vaccination will do much to lessen the risk of complications.

Influenza is dangerous mostly because of what may follow it

CURE.

In the event of an attack of influenza, the patient is advised to adopt the following measures with a view to securing a speedy return to convalescence and avoidance of complications :—

- (A) At the first feeling of illness or immediately on a rise of temperature the patient should leave his work, go home and go to bed ; he should keep warm, and should send for the doctor.
- (B) On convalescence, the patient should avoid meeting-places and places of entertainment for at least one week after his temperature has become normal.
- (C) Recovery should be fully established before return to work.

PERSONS NURSING INFLUENZA.

- (A) The patient should, if possible, occupy a separate bedroom or a bed screened off from the rest of the room. This rule should be observed until the temperature is normal.
- (B) The patient should be kept warm.
- (C) All curtains and other articles which prevent a free circulation of the air about the patient's bed should, as far as possible, be removed.

- (D) Inhalation of the patient's breath should be avoided.
- (E) A handkerchief or other screen should be held before the mouth, and the head should be turned aside while the patient is coughing or sneezing.
- (F) The hands should be washed at once after contact with the patient.

EMPLOYERS.

Workers who are obviously ill should be sent or taken home at once. Their continuance at work is bad for them and dangerous to others.

E. W. ROUTLEY,
Medical Officer of Health.

ALDERSHOT,
January, 1920.

PULMONARY TUBERCULOSIS.—Twenty-six deaths were registered due to this disease. Sixteen notifications of fresh cases were received. One or two of these were notified only just before death. These, however, appeared to be old cases of the disease, which had probably been previously notified in other districts. I note that there is a disinclination to notify in some cases, due to the not unnatural wish to avoid stamping an individual with a tuberculosis label, until the diagnosis is practically certain. Early suspected cases are, however, constantly being sent for diagnosis to the Tuberculosis Dispensary.

MALARIA.—The case notified was, on inquiry, found not to be a primary case.

DYSENTERY.—One case was reported which was of a primary nature, and in which the *Bacillus of Flexner* was found on bacteriological investigation. All available precautions were taken, and no further cases were reported.

SMALL POX.—No cases were reported. No primary vaccinations or revaccinations were performed by the Medical Officer of Health under the Small Pox Prevention Regulations, 1917.

ANTHRAX.—A death, which was thought at the time to be attributable to ordinary septic poisoning from a wound in the neck, occurred in October. The history of the case, in the course of investigation of the circumstances of the illness, led me to institute, with the kind assistance of Captain Lundie, R.A.M.C., a bacteriological examination of the shaving-brush in use by the deceased, and it was established beyond doubt, by culture methods and by animal inoculation, that the case was one of anthrax.

The unusual nature of the case was illustrated by the fact that the brush used for shaving was a painter's sash-tool prepared with hair, and had been used by the deceased for shaving purposes for at least three years previously without any ill result.

RABIES.—There were no cases reported, but precautionary notices were issued in posters and in the local press.

MATERNITY AND CHILD WELFARE.

1. INSPECTION OF MIDWIVES.—Eight midwives were practising in the Town during 1919, and their case books, bags, and appliances are inspected every quarter. Seven of them have had a long experience in the work, and are careful and capable women. The remaining one only commenced to practise during the year, but has had few cases.

Thirty-nine records of sending for medical help were received by me during the year. No case of Puerperal Fever were reported in 1919, and one case only of Ophthalmia in the new born.

The following is a summary of the returns furnished to me by the midwives themselves at the close of the year. (The return of one is wanting, as she left for India before the close of the year.)

Total number of all cases attended (either in the capacity of midwife or nurse)	291
Total number attended in capacity of midwife	244
Total number attended in capacity of nurse only	47
Number of still births occurring in their practice	11
Number of twin births occurring in their practice	4

And they further report that at the close of their attendance only four babies were being artificially fed, the remainder being entirely breastfed. As far as possible they do their best to see that infants have a good start in life in being brought up by the natural method.

NOTIFIED BIRTHS.—345 births (330 living, 15 still) were notified as occurring in the town, and 131 (129 living, 2 still) in the South Camp. The number of civilian registered births in the same period was 483 (of which 45 were illegitimate). The I.M. Rate was 86—42 infants under one year died, of whom 4 were illegitimate.

2. THE MATERNITY AND CHILD WELFARE SCHEME, which was originated in April, 1918, has been continued with success in 1919. The welfare clinic is held on Monday afternoons at Llantinsant, Church Lane, and since the arrival of the new Health Visitor (Miss Carswell), in April, 1919, the attendance

of mothers and children has very greatly increased, so that under good meteorological conditions, between 40 and 50 mothers come with their children for inspection and advice.

Owing to the generous assistance of Mrs. Ronald Brooke and Mrs. Alexander, the mothers are invited to have tea and light refreshments and very hearty thanks are due to Mrs. Wright, of the Education Committee, for her kindness in coming so regularly to help in these arrangements. Her assistance is invaluable, and is highly appreciated.

Below is a detailed summary of the work done during the year :—

First visits to children under one year	378
Total visits to children under one year	1669
Visits to children under five years	2785
Visits paid to children suffering from the common infectious diseases (measles, etc.)	29
Total number of actual visits to houses during the year	2814

WELFARE CLINIC.

Number of mothers who have attended	204
Number of children who have attended	240
Number of children attending for treatment of minor ailments	9
Total number of children	249
Number of attendances of children	898
Number of attendances of children for treatment	118
Total number of attendances of children	1,016
Total number of attendances of mothers	915
Average attendances of mothers in 1919	18
Average attendances of mothers since May 1st	28
Average attendances of children	20
Number of houses reported to Sanitary Inspector for further investigation as to sanitary condition	32
Cases referred to N.S.P.C.C.	3

Dried milk is supplied at cost price in appropriate cases.

Under the Food and Milk Order, 26 nursing or expectant mothers were furnished with a daily supply of milk (usually 2 pints) for specified periods (usually three months) free of charge. The Soldiers' and Sailors' Families' Association have done good work in attending to necessitous cases occurring in such families.

INFANT DEATHS.—These have been the subject of inquiry in every instance. Although only two deaths were actually certified to be due to syphilis, there is little doubt that a large proportion of the 19 deaths which come under the heading of

Premature Birth, inanition, etc., were due to ante-natal causes, the principal one being venereal disease. One death was attributed to whooping cough, 6 others occurring from Bronchitis and Pneumonia. One death, the subject of an inquest, was from overlaying. The infant mortality rate for 1919 was 86 per 1,000 registered births.

DAILY CRECHE.—This is carried on at the Child Welfare and School Clinic, under the charge of the resident matron (Miss Thynne Cordner), with the assistance of three probationers. The average number of children received daily is 12, and the number of individual children who have been admitted during 1919 was 39. The need for the Crèche, which was very marked throughout the war, has somewhat diminished since the armistice, owing, of course, to the corresponding diminution of employment of women in the military establishments. The nursery was closed from October 21 to November 10, owing to the number of cases of Whooping Cough in young children.

3. PUERPERAL FEVER.—No cases were reported.

OPHTHALMIA NEONATORUM.—One case only was notified both by the midwife and the medical practitioner who was called in. The condition affected one eye only, was apparently of a very mild character, and entirely cleared up within a comparatively short time.

The Health Visitor made daily visits until recovery was complete.

MEASLES.—Fifteen cases in all were notified, mainly of sporadic cases. These were all visited by the Health Visitor, who hands a circular dealing with the precautions to be taken, sees that the patient has isolation (as far as practicable), and reports any insanitary condition that may be met with. There were no deaths from the disease in 1919. Those in charge of young children should always bear in mind that Measles is by no means a trivial disease, and that it often leaves behind some actual organic defects which later is of serious importance, or may by weakening the natural resistance of the body, conduce to serious disease of the lungs.

WHOOPING COUGH.—This also is a serious disease in that it frequently leads to chronic lung complaints and Tuberculosis. Fifteen cases were reported in school children, mainly in the East end district, and one death took place.

EPIDEMIC DIARRHOEA.—No cases reported during the year.

POLIOMYELITIS.—Three cases were notified during August and September, with one death in a child of ten months. All cases were investigated, and inquiries from medical practitioners led to the conclusion that several other cases had occurred but escaped notification, apparently owing to difficulty in diagnosis while in the acute stage. Later on various instances of slight paralysis of one or more muscles led to a revision of opinion as to the real nature of the acute illness. It is noteworthy that the cases occurred mainly in the warmest month, and that most of them were in the Holly Road and its neighbourhood. Personal disinfection (antiseptic gargles, etc.), with isolation as far as it was practicable, were the measures relied on for prevention. One child of six years of age remains completely paralyzed in her lower limbs as the result of this disease.

SANITARY ADMINISTRATION.

1. The staff consists of the Medical Officer of Health (who is also School Medical Officer and Assistant Tuberculosis Officer), the Inspector of Nuisances, and the Health Visitor. There is no clerical staff.

CIVIL ISOLATION HOSPITAL.

2. **ACCOMMODATION.**—The institution comprises an administrative block, three isolation blocks, two single isolation wards for observation cases, a discharge block, and laundry and disinfecting station. The Scarlet Fever wards have accommodation officially for eight beds, the Diphtheria block ten beds, the new block (as yet unused) six beds, which, with the two observation wards, makes a total of 26 beds, with statutory cubic space allowance available for patients.

The staff normally consists of matron, three assistant nurses, three domestic helps, and porter. The number of staff employed during the year has been much less than this, owing to the increasing difficulty of obtaining satisfactory nursing and domestic service.

The disinfection in use is a modified Washington Lyon, worked with a pressure of 25 lbs. per square inch in the jacket, and 10 lbs. in the chamber.

A Climax spraying machine, working with a 6 per cent. formaline solution, is employed for general outside disinfecting purposes.

Forty-four cases were admitted during 1919—namely, 17 Diphtheria cases, 24 Scarlet Fever cases, and 3 observation cases.

Fifteen out of the 44 cases were those from other districts (Farnborough 11, Fleet 3, Hartley Wintney 1).

Bacteriological examinations are made in all Diphtheria cases before final discharge.

SMALL POX.—A temporary building of corrugated iron supported on brick piers, is in readiness on a piece of land adjoining the Sewage Works. Gas and water supply are provided, and two earth closets represent the necessary lavatory accommodation. The building contains ten rooms, eight of which could be utilized, when necessary, for small pox patients. It is now under the authority of the County Council, by whom a yearly rent is paid to the District Council. It represents, therefore, a joint District Hospital, which would doubtless be used for all cases occurring in the north-eastern area of the county.

3. ADOPTIVE ACTS IN FORCE IN THE DISTRICT.

Public Health Amendment Act	1890
Infectious Disease Prevention Act	1890
Private Street Works' Act	1892
Public Health Amendment Act (Parts II., III., IV., V., VI., and certain sections of VII., IX., and X.)	1907

BYE-LAWS IN FORCE.

	Date Made.
Cleansing of Footways, Pavements and Cesspools	1887
Common Lodging Houses	1887
Hackney Carriages	1887
Hackney Carriages (mechanically driven)	1910
Houses Let in Lodgings	1908
Mortuary	1888
New Streets and Buildings	1887
Nuisances	1887
Offensive Trades (Blood Boiler, Blood Drier, Bone Boiler)	1888
Pleasure Grounds	1888
Slaughter Houses	1887
Tents, Vans and Sheds	1907

REGULATIONS are in force in the district in respect to :—

Dairies, Cowsheds and Milkshops	1900
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4. CHEMICAL AND BACTERIOLOGICAL LABORATORY.

The following examinations have been carried out during the year :—

Examination in suspected	Diphtheria	.....	.....	98
" " "	Tuberculosis	.....	.....	10
" " "	Venereal Diseases	.....	.....	6
" " "	Cerebro-spinal Fever	.....	.....	2
" " "	Dysentery	.....	.....	2
" " "	other cases	.....	.....	2
				<hr/> 120

In addition. 10 samples of sewage effluent and 2 of drinking water were analyzed.

OTHER SERVICES.—The authorities of the Cottage Hospital afford willing co-operation in admitting special cases arising more particularly from the medical inspection of schools. Their accommodation, however, is very limited. The Union Infirmary, situated three miles distant at Farnham, is also largely utilized for the admission of patients whom it is thought desirable to remove from their surroundings, and who are ineligible for any reason for admission to the Isolation or the Cottage Hospitals. Cases of illness occurring in Military families are likewise, in certain instances, removed to military hospitals.

HOUSING.

1. HOUSES.—Estimated total number of dwelling houses, 3,950, of which about 75 per cent. are occupied by the working classes.

No new houses for the working classes were erected during 1919, nor are any in course of erection.

2. POPULATION.—The population (which is in this town of a fluctuating character) is estimated at 22,500. Changes are, of course, constantly taking place in the camp, and this is reflected in the civil population. No important changes are to be anticipated in the future.

3. (a) Three hundred is the number that is being depended on to satisfy present needs, together with those for a few years ahead. The supply of 100 houses would probably meet the housing difficulties at the present moment.

(b) Aldershot Park, an estate of about 157 acres, has been purchased by the Council for the erection of 300 houses. Tenders have been issued for the immediate erection of 106

on this site as a first instalment. A site in King's Road, sufficient for the erection of 20 houses, has also been purchased ; but it is intended first of all to proceed with the Aldershot Park scheme.

The Manor Estate, of 35 acres, has also been purchased by the Council for the provision of open spaces, and also for education purposes.

(i) OVERCROWDING.—(1) Serious overcrowding is only present in a few cases, affecting one or two particular streets. There is, however, generally a slight amount of undesirable crowding, which would be dealt with by the provision of new houses.

(2) *Excessive Overcrowding*.—In cases where it has been discovered, has usually been found to be due—firstly, to the inability to find suitable quarters ; and this in turn, in many cases, is ascribable to insufficient means.

(3) MEASURES TAKEN.—In some cases, families, or members, have been removed to the infirmary, as the only way of dealing with the difficulty ; in others, alternative accommodation has been found in different quarters.

(4) There were 13 marked cases of overcrowding brought to notice in 1919, of which eight were of a serious nature ; the particulars of these are as follows :—

Case A. 2 adults and 4 children living and sleeping in small back bedroom of 800 cubic feet capacity.

B. 9 adults and 5 children in 6-roomed house.

C. 10 adults and 5 children in 6-roomed house.

D. 4 adults living and sleeping in small room of 900 cubic feet.

E. 6 adults and 2 children occupying 2 small rooms, 800 cubic feet and 500 cubic feet respectively.

F. 2 adults and 6 children using as a bedroom a small room of 960 cubic feet.

G. 6 adults and 5 children in a house of 5 rooms.

H. 3-roomed house occupied by a family, which consisted of 4 adult males, and 1 male of 10 ; 4 adult females and 1 female under 10 ; 10 persons in all.

In every case informal notices were served, and the conditions remedied.

ii. FITNESS OF HOUSES.—1. (a) The general standard of housing in the district is good, there being very few old buildings.

(b) The defects found are classified in another section of this report. The general character of the defects has relation (1) to structural evils—namely defective guttering of roofs and consequent dampness of upper rooms ; (2) dirty walls and ceilings.

2. The action taken was usually that under Sections 15 and 17 of the Housing Acts, by preliminary notices, repeated in certain cases in statutory form.

3. Difficulties in remedying unfitness were ascribed to inability to attain material or labour, and perhaps unwillingness on account of cost. No special measures were, however, required beyond the serving of the usual notice.

iii. UNHEALTHY AREAS.—No representations have been made before or during 1919.

iv. BYE-LAWS RELATING TO HOUSES, ETC.—(1) The existing byelaws appear to work quite satisfactorily, and there is not, as a rule, much difficulty in obtaining compliance. (2) There does not appear at present any need for new or revised bye-laws.

v. GENERAL AND MISCELLANEOUS.—No action other than that described in preceding paragraphs has been taken.

vi. APPENDICES.—(1) Complaints by householders with respect to houses unfit for habitation. None.

(2) *Action under Section 17, Housing Act, 1909.*

(a) Preliminary notices, and in certain cases statutory notices were issued with regard to 35 dwelling houses.

(b) One dwelling house was considered to be unfit for human habitation, and was voluntarily closed.

(c) All the dwelling houses, except that described in (b), were made fit without the making of closing orders.

(3) No action has been taken during the year under Section 28 of the Housing Act, 1919, but it is intended during 1920 to take action in the majority of cases under this particular Section.

(4) *Closing Orders.*—No statutory representations were made. One house, as above stated, was closed voluntarily.

(5) *Demolition Orders.*—None.

(6) *No voluntary Demolition of Dwelling Houses.*

(7) *Obstructive Buildings.* None.

ANNUAL REPORT TO THE ALDERSHOT EDUCATION
COMMITTEE OF THE SCHOOL MEDICAL OFFICER FOR
THE YEAR 1919.

GENTLEMEN,

I beg to present my Report for the year 1919, with regard to the Medical Inspection of children in the Elementary Schools in your area.

The following is a general summary of school attendance for the month of June, 1919, also 1918 :—

SCHOOL.	No. of Teachers.	Accommodation.	1919				1918			
			Number on Books.	Highest No. Present.	Average Attendance.	Percentage of Absentees.	Number on Books.	Highest No. Present.	Average Attendance.	Percentage of Absentees.
West End.										
Boys	12	370	429	423	403	6	438	423	403	8
Girls	10	295	361	355	329	9	399	388	359	10
Infants	11	666	460	448	411	8	467	439	406	13
Total	33	1331	1250	1226	1143	9	1304	1250	1168	10
East End.										
Boys	11	317	406	397	381	6	421	404	393	6
Girls	9	342	350	342	327	6	358	351	331	7
Infants	6	216	192	182	174	9	188	184	177	5
Total	26	875	948	921	882	7	967	939	901	7
Newport Road.										
Mixed	13	480	519	512	476	8	526	516	495	7
Infants	5	300	189	188	171	10	225	216	200	11
Total	18	780	708	700	647	9	751	732	695	8
C. of E. School.										
Mixed	5	112	149	146	141	4	162	158	151	
Infants	2	78	66	63	61	8	72	68	63	11
Total	7	190	215	209	202	6	234	226	214	8
Rom. Catholic.										
Mixed	6	182	211	206	193	9	220	214	203	8
Infants	3	112	114	105	98	14	100	94	90	9
Total	9	294	325	311	291	10	320	308	293	8
Grand Totals	93	3482	3446	3367	3165	8	3576	3455	3271	9

SCHOOL CLINIC.—This is open every morning at 9 o'clock for the treatment of minor ailments. Two half days per week are arranged for dental treatment, an average of 14 cases

PHYSICAL TRAINING.—There is no official organizer for this subject, the area being of small size. The work of organization, however, is done by Sergeant Goodbody, who drills the boys at all the schools regularly, and instructs and supervises the women teachers in arranging for the girls the physical exercises prescribed by the code.

EMPLOYMENT OF CHILDREN OF SCHOOL AGE.—Children of school age are not employed to any extent in Aldershot. It is computed that not more than 12 are engaged in employment out of school hours.

LEGAL PROCEEDINGS.—In the cases of 8 children the parents were summoned and convictions obtained for uncleanness. The legal proceedings were taken in all cases under the School Attendance Byelaws. No proceedings were taken under the Children Act, 1908.

MENTAL DEFICIENCY.—Approximately 30 children with marked mental deficiency attend the Elementary School, with very little advantage to themselves. Admission to mental institutions, except in a very few selected cases, appears to be extremely difficult. A special school, or a Mental Defective Class, ought to be instituted, where the very backward and mentally defective children could be properly dealt with by specialised and individual supervision.

TABLE I.—NUMBER OF CHILDREN INSPECTED 1st
JANUARY, 1919, TO 31st DECEMBER, 1919.

A. " CODE " GROUPS.

Age.	Entrants.					
	3.	4.	5.	6.	Other Ages	Total.
Boys	—	—	198	61	9	268
Girls	—	—	181	70	19	270
Totals	—	—	379	131	28	538

Age.	Intermediate Group. Leavers.						Grand Total
	8.	12	13	14	Other Ages.	Total.	
Boys	152	127	18	—	—	297	565
Girls	135	114	7	—	—	256	526
Totals	287	241	25	—	—	553	1091

B. Groups other than " Code " X.

(1)	Intermediate Group (other than 8 yrs.). (2)	Special cases. (3)	Re-Examina- tions (<i>i.e.</i> No. of Children Re-examined) (4)
Boys		385	77
Girls		782	504
Totals		1167	581

Table II.—Return of Defects Found in the Course of Medical Inspection in 1919.

DEFECT OR DISEASE		CODE GROUPS		SPECIALS	
		Number referred for Treatment	Number requiring to be kept under observation but not referred for Treatment	Number referred for Treatment	Number requiring to be kept under observation but not referred for Treatment
(1)		(2)	(3)	(4)	(5)
	Malnutrition	6	—		
	Uncleanliness				
	Head	43		449	
	Body	3			
Skin	Ringworm :				
	Head	3		52	
	Body			28	
	Scabies			10	
	Impetigo			75	
	Other Disease			9	
Eye	Defective Vision & Squint	34	4	44	5
	External Eye Disease	5		5	
Ear	Defective Hearing	30	6	6	
	Ear Disease	15		33	
Teeth	Dental Disease (see N.B. (2) below)				
Nose and Throat	Enlarged Tonsils	7	9	11	4
	Adenoids	5	15	11	1
	Enlarged Tonsils & Adenoids	6		15	
Heart and Circulation	Defective Speech				
	Heart Disease		5		1
	Organic		15		
	Functional				
Lungs	Anaemia	2		1	
	Pulmonary Tuberculosis :				
	Definite	1			
	Suspected		4		
	Chronic Bronchitis				
Nervous System	Other Disease		3		2
	Epilepsy		3	1	
	Chorea				
	Other Disease		6		
	Non-pulmonary Tuberculosis:				
	Glands	2	3		
	Bones and Joints			2	
	Other Forms		12		
	Rickets		12		
	Deformities				
	Other Defects or Diseases	20	12	132	3

TABLE III.—NUMERICAL RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA IN 1919.

			Boys	Girls	Total	
Blind (including partially blind)			Attending Public Elementary Schools	1	1
			Attending Certified Schools for the Blind.	1	1
Deaf and Dumb (including partially deaf)			Not at School	1	1
			Attending Public Elementary Schools.	2	2	4
			Attending Certified Schools for the Deaf	4	3	7
			Not at School
Mentally Deficient.	Feeble Minded.	Attending Public Elementary Schools.	6	1	7	
		Attending Certified Schools for Mentally Defective Children.	1	.....	1
		Notified to the Local (Control) Authority during the Year.	2	.....	2
	Imbeciles.	Not at School	1	3	4	
		At School. In Home	.....	1	1
		Not at School	1	.....	1
	Idiots.					
Epileptics.			Attending Public Elementary Schools.	1	1	2
			Attending Certified Schools for Epileptics.
Physically Defective.	Pulmonary Tuber- culosis.	Not at School	.....	1	1
		Attending Public Elementary Schools.	.....	1	1
		Attending Certified Schools for Physically Defective Children.	.....	.....	.....
		Not at School	.....	.....	.....
	Other forms. of Tuber- culosis.	Attending Public Elementary Schools.	2	.....	2
		Attending Certified Schools for Physically Defective Children.	.....	.....	.....
		Not at School	3	2	5	
	Cripples others than Tubercular.	Attending Public Elementary Schools.	1	2	3	
		Attending Certified Schools for Physically Defective Children.	.....	.....	.....
Dull or Backward.*			Not at School
			Retarded 2 years	49	39	88
			Retarded 3 years	23	19	42

* Judged according to age and standard.

TABLE IV.
TREATMENT OF DEFECTS OF CHILDREN DURING 1915.

CONDITION	No of defects found for which treatment was considered necessary.			No. of defects for which no report is available	No of defects treated	Results of Treatment			No. of defects not treated	Percentage of defects treated
	From previous year	New*	Total			Remedied	Improved	Unchanged		
Clothing		495	495	7	488	488				99
Footwear		8	8		8	8				100
Cleanliness of Head		6	17	1	16	6	9	1	18	94
Cleanliness of Body		55	70	5	47	47				67
Nutrition.	11	15	70		15	9	5	1		100
Nose and Throat	5	10	15		15	9	5	1		90
External eye Disease	15	48	63	6	57	27	29	1		80
Ear Disease	234	541	775	47	621	617	4		107	
Teeth										
Heart and Circulation		1	4		4		4			100
Lungs.....	3	1	10	2	8	1	6	15		80
Nervous System	9	1	174	4	170	162	8			97
Skin	5	169	1		1	1				100
Rickets	1	1								
Deformities										
Tuberculosis, Non-Pulmonary	7	2	9	1	8	1	7			88
Speech										
Vision and Squint	15	78	93	1	81	74	3	4	11	87
Hearing	11	36	47	4	43	32	11			92
Miscellaneous	13	152	165	4	156	149	16		5	94
Total	344	1602	1946	82	1723	1613	102	8	141	89%

* The return should show comprehensively all defects found during the year, from whatever source derived, which required treatment.

TABLE V.—INSPECTION, TREATMENT, &c. OF
CHILDREN DURING 1919.

(1) The total number of children medically inspected (whether Code Group, special or ailing child).	2228
(2) The number of children in (1) suffering from defects (other than uncleanness or defective clothing or footgear) who require to be kept under observation (but not referred for treatment).	113
(3) The number of children in (1) who were referred for treatment (excluding uncleanness, defective clothing, etc.).	1186
(4) The number of children in (3) who received treatment for one of more defects (excluding uncleanness, defective clothing, etc.)	1080

